Docket No.:

DECLARATION AND POWER OF ATTORNEY UNDER 35 USC §371(c)(4) FOR PCT APPLICATION FOR UNITED STATES PATENT

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated below under my name;

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought, namely the invention entitled <u>Use of bacterial extracts from the family Pseudomonadaceae as cosmetic agents</u>

described and claimed in international application number PCT/FR99/02043 filed on August 26, 1999

I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations §1.56.

Under Title 35, U.S. Code §119, the priority benefits of the following foreign application(s) filed by me or my legal representatives or assigns within one year prior to my international application are hereby claimed:

The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to my international application, or (b) before the filing date of the above-named foreign priority application(s):

I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the Patent Office:

James A. Oliff, Reg. No. 27,075; William P. Berridge, Reg. No. 30,024; Kirk M. Hudson, Reg. No. 27,562; Thomas J. Pardini, Reg. No. 30,411; Edward P. Walker, Reg. No. 31,450; Robert A. Miller, Reg. No. 32,771; Mario A. Costantino, Reg. No. 33,565; Stephen J. Roe, Reg. No. 34,463; Joel S. Armstrong, Reg. No. 36,430; Christopher W. Brown, Reg. No. 38,025; and Richard E. Rice, Reg. No. 31,560.

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, PLC, P.O. BOX 19928, ALEXANDRIA, VIRGINIA 22320, TELEPHONE (703) 836-6400.

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

1	Typewritten F				
	of Sole or Firs	t Inventor	Richard		MARTIN
2	Inventor's Signature:		Given Name Richard	Middle Initial	Family Name Machu
3	Date of Signat	ture:	4	3	2007
	_		Month	Day ^c	Year
	Residence: ROCHECORI		BON		FRANCE
		City		State or Province	Country
	Citizenship:	FRENCH			•
	Post Office Address: (Insert complete mailing address, including country)		8, Allée du Clos du Pin		
			37210 ROCH	IECORBON - FRANCE	

Note to Inventor: Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

1	Typewritten Full Name				
	of Joint Inventor		Pascal		HILAIRE
2	Inventor's Signature:	Given Name		Middle Initial	Family Name
3	Date of Signature:		04	05	2002
	Residence:	VOUVR		Day	Year FRANCE
	Citizenship: F	Ci RENCH	ity	State or Province	Country
	Post Offic	e Address:	L'HOMME		•
	(Insert con address, in	mplete mailing ncluding country)	37210 VOUVRAY	- FRANCE	
	Typewritten Full Name				
	of Joint Inventor		Nathalie		PINEAU
	Inventor's Signature:		Given Name Wornalie	Middle Initial	Family Name
	Date of Signature:		03	29	402
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	Residence:	POIT.		State or Province	ERANCE
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	(Insert co	mplete mailing ncluding country)	86000 POITIERS -		/ BRETON
	(Insert con address, in Typewritten Full Name	mplete mailing ncluding country)	86000 POITIERS -	FRANCE Middle Indial	——————————————————————————————————————
	(Insert con address, in Typewritten Full Name of Joint Inventor Inventor's Signature:	mplete mailing ncluding country)	86000 POITIERS - Lionel Given Name	FRANCE Middle Indial	BRETON Family Name
	(Insert con address, in Typewritten Full Name of Joint Inventor	mplete mailing ncluding country)	86000 POITIERS - Lionel Given Name	FRANCE Middle Indial	BRETON Family Name
	(Insert con address, in Typewritten Full Name of Joint Inventor Inventor's Signature:	mplete mailing ncluding country)	Lionel Given Name O Month MILLES	FRANCE Middle Initial Z Day	BRETON Family Name 2002 Year FRANCE
	(Insert con address, in Typewritten Full Name of Joint Inventor Inventor's Signature: Date of Signature: Residence:	mplete mailing ncluding country)	Lionel Given Name O Month MILLES	FRANCE Middle Initial 28	BRETON Family Name 2002 Year
	(Insert con address, in Typewritten Full Name of Joint Inventor Inventor's Signature: Date of Signature: Residence: Citizenship: Fi	mplete mailing ncluding country) VERSA	Lionel Given Name O Month MILLES	FRANCE Middle Initial Z Day	BRETON Family Name 2002 Year FRANCE
	(Insert con address, in Typewritten Full Name of Joint Inventor Inventor's Signature: Date of Signature: Residence: Citizenship: Post Offic (Insert con address)	wellete mailing neluding country) VERSA Ci RENCH	Lionel Given Name O Month AILLES ity	FRANCE Middle Initial Day State or Province	BRETON Family Name 2002 Year FRANCE
	(Insert con address, in Typewritten Full Name of Joint Inventor Inventor's Signature: Date of Signature: Residence: Citizenship: Post Offic (Insert con address)	VERSA Ci RENCH The Address: The Address: The Address is the state of the state o	Lionel Given Name Month AILLES ity 14, rue de Satory	Middle Initial Day State or Province CS - FRANCE	BRETON Family Name Year FRANCE Country
	(Insert con address, in Typewritten Full Name of Joint Inventor Inventor's Signature: Date of Signature: Residence: Citizenship: Post Office (Insert con address, in Typewritten Full Name)	VERSA Ci RENCH The Address: The Address: The modern and the mailing and t	Lionel Given Name Month AILLES ity 14, rue de Satory	FRANCE Middle Initial Day State or Province	BRETON Family Name 2002 Year FRANCE
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	(Insert con address, in Typewritten Full Name of Joint Inventor Inventor's Signature: Date of Signature: Residence: Citizenship: Post Office (Insert con address, in Typewritten Full Name of Joint Inventor	VERSA Ci RENCH The Address: The Address: The modern and the mailing and t	86000 POITIERS - Lionel Given Name O 3 Month ILLES ity 14, rue de Satory 78000 VERSAILLE	Middle Initial Day State or Province Middle Initial	Family Name Parity Name Year FRANCE Country Family Name

Note to Inventor: Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney of the application to which it pertains.